

06-01-01

PATENT

UTILITY PATENT APPLICATION TRANSMITTAL

(only for new non-provisional applications under 37 CFR §1.53(b))



Commissioner of Patents
Box Patent Application
Washington, D.C. 20231
Sir:

Transmitted herewith for filing is the patent application
under 37 CFR 1.53(b) of:

AVENTIS DOCKET NO.: CA2295US NP
INVENTORS: Alan J. Collis et al
TITLE: HETEROARYL-CYCLIC ACETALS

I hereby certify that this correspondence is being
deposited with the United States Postal Service as
Express Mail in an envelope addressed to
Commissioner for Patents, Washington, D.C. 20231,
on

May 31, 2001
Date of Deposit

Bonnie Stein
Signature

EL 816575931 US
Express Mail No.

APPLICATION ELEMENTS

1. <input checked="" type="checkbox"/>	*Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>	Total Pages	<input type="text" value="55"/>
2. <input checked="" type="checkbox"/>	Specification <i>(preferred arrangement set forth below)</i> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure	Total Pages	<input type="text" value="55"/>
3. <input type="checkbox"/>	Drawing(s) <i>(35 U.S.C. 113)</i>	Total Sheets	<input type="text" value="0"/>
4. <input type="checkbox"/>	Oath or Declaration a. <input checked="" type="checkbox"/> Newly unexecuted	Total Pages	<input type="text" value="2"/>
b. <input type="checkbox"/>	Copy from a prior application <i>(37 CFR § 1.63(d))</i> <i>(for continuation/divisional with Box 16 completed)</i>		
i. <input type="checkbox"/>	DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§ 1.63(d)(2) and 1.33(b).		
5. <input type="checkbox"/>	Microfiche Computer Program <i>(Appendix)</i>		
6. <input type="checkbox"/>	Nucleotide and/or Amino Acid Sequence Submission <i>(If applicable, all necessary)</i>		
a. <input type="checkbox"/>	Computer Readable Copy		
b. <input type="checkbox"/>	Paper Copy <i>(identical to computer copy)</i>		
c. <input type="checkbox"/>	Statement verifying identity of above copies		

If a **CONTINUING Application**, check appropriate box, and supply the requisite information:
 Continuation Divisional Continuation-in-part
 of prior application no: PCT/GB99/04283, filed December 16, 1999,
 Examiner _____, Group/Art Unit _____.
 (The cross reference has been/will be inserted on page one of the specification).

This application claims the benefit of GB Application No. 9827721.3, filed December 16, 1998, and U.S. Provisional Application No. 60/122,425, filed March 2, 1999. (The cross reference has been/will be inserted on page one of the specification).

Incorporation By Reference (useable if filing a continuation/divisional and a copy of the declaration from the prior application is enclosed.)
 The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

ACCOMPANYING APPLICATION PARTS

7. Assignment Papers (cover sheet & document(s))

8. 37 CFR §3.73(b) Statement Power of Attorney
 (when there is an assignee)

9. English Translation Document (if applicable)

10. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

11. Preliminary Amendment

12. Return Receipt Postcard (MPEP 503)
 (Should be specifically itemized)

13. *Small Entity Statement(s) Statement filed in prior application,
 (PTO/SB/09-12) Status still proper and desired

14. Certified Copy of Priority Document(s)
 (if foreign priority is claimed)

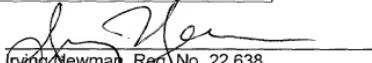
15. Other: EFS Print

CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label

005487

(Insert Customer No. or Attach bar code label here)


 Irving Newman, Reg. No. 22,638
 Attorney/Agent for Applicant

Aventis Pharmaceuticals Inc.
 Patent Department
 Route #202-206 / P.O. Box 6800
 Mail Code: EMC-G1
 Bridgewater, New Jersey 08807-0800
 Telephone (908) 231-2785
 Telefax (908) 231-2626

Aventis Docket No. CA2295US NP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$ 710)

Complete if Known

Application Number	TBD
Filing Date	Concurrently herewith
First Named Inventor	Alan J. Collis et al
Examiner Name	TBD
Group / Art Unit	TBD
Attorney Docket No.	CA2295US NP

METHOD OF PAYMENT

FEE CALCULATION (continued)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 18-1982

Deposit Account Name Aventis Pharmaceuticals Products Inc.

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
 Applicant claims small entity status. See 37 CFR 1.27.

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	201	355	Utility filing fee	710
106	320	206	160	Design filing fee	
107	490	207	245	Plant filing fee	
108	710	208	355	Reissue filing fee	
114	150	214	75	Provisional filing fee	

SUBTOTAL (1)

(\$ 710)

2. EXTRA CLAIM FEES

Total Claims	- 20** =	Extra Claims	Fee from below	Fee Paid
20	- 20** =	0	x	= 0
Independent	2	- 3** =	0	x = 0
Claims				
Multiple Dependent				= 0

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ 0)

3. ADDITIONAL FEES

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English Specification	
147	2,520	147	2,520 For filing a request for reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	390	216	195 Extension for reply within second month	
117	890	217	445 Extension for reply within third month	
118	1,390	218	695 Extension for reply within fourth month	
128	1,890	228	945 Extension for reply within fifth month	
119	310	219	155 Notice of Appeal	
120	310	220	155 Filing a brief in support of an appeal	
121	270	221	135 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,240	241	620 Petition to revive - unintentional	
142	1,240	242	620 Utility issue fee (or reissue)	
143	440	243	220 Design issue fee	
144	600	244	300 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Petitions related to provisional applications	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	710	246	355 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249	365 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279	365 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

**or number previously paid, if greater; For Reissues, see above

SUBTOTAL (3) (\$)

SUBMITTED BY

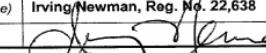
Complete (If applicable)

Name (Print/Type) Irving Newman, Reg. No. 22,638

Registration No. (Attorney/Agent)

22,638

Telephone (908) 231-2785

Signature Date 5/30/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-208.

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of this individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.